

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Senate Conservatives Fund</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00448696		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee <b>Senate Conservatives Fund</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 11 / 2014		
Mailing Address PO Box 388			Amount 1407.70		
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E81AFC3D4E364421FB17		
Purpose of Expenditure IE-Cotton-Online Processing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 11 / 2014		
Name of Federal Candidate Thomas Cotton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014		
59697.36					
Full Name of Payee <b>Senate Conservatives Fund</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 15 / 2014		
Mailing Address PO Box 388			Amount 843.50		
City Alexandria	State VA	Zip Code 22313-0388	Transaction ID : E3A2639AF0ECD4197A9B		
Purpose of Expenditure IE-Cotton-Online Processing		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 15 / 2014		
Name of Federal Candidate Thomas Cotton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AR		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014		
60540.86					
(a) SUBTOTAL of Itemized Independent Expenditures..... ►			2251.20		
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ►					
(c) TOTAL Independent Expenditures..... ►					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  Paul Kilgore		[Electronically Filed]		Date MM / DD / YYYY 10 / 18 / 2014	

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 2 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Senate Conservatives Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00448696         </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Conservative Connector LLC</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 18 / 2014</div> </div>	
Mailing Address 435 East Main St. Ste. 250		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12694.45</div>	
City Greenwood	State IN	Zip Code 46143-1464	<b>Transaction ID : EAF45C801881F43A9A48</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 10 / 18 / 2014</div> </div>
Purpose of Expenditure IE-Cotton-Email List Rental		Category/Type	
Name of Federal Candidate Thomas Cotton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: <u>AR</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">73235.31</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014

Full Name of Payee		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
City	State	Zip Code	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY</div> </div>
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ►

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;">12694.45</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
<b>(c) TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; text-align: right;">14945.65</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Paul Kilgore*

[Electronically Filed]

Date

MM / DD / YYYY  
10 / 18 / 2014

Signature